24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
USA FREEDOM FUND	C C00745208
	O minute
Check if 24-hour report	ed on M / D D / Y Y Y Y
Full Name of Payee Armada Strategies, LLC	Date of Public Distribution/Dissemination
Mailing Address 2637 E Atlantic Blvd	
Suite 43878	Amount
City State Zip Code	433757.80
Pompano Beach FL 33062	Transaction ID : SE.4214 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	10 22 2021
Name of Federal Candidate Support Off	ice Sought: House District: 00
MANDEL, JOSHUA A., , ,	President State: OH
Calendar Year-To-Date Per Election for Office Sought Dis 202	sbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Of	fice Sought: House District:
Oppose	President Senate State:
Galorida Total To Bate	sbursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	433757.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	433757.80
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Datwyler, Thomas, , , [Electronically Filed] Date Signature	10 24 2021
Oignature	